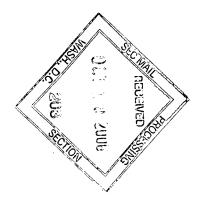
/378306

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.







OMB APPROVAL

OMB Number: 32350076

Expires: April 30, 2008

Estimated average burden hours per response... 16

SEC USE ONLY

Prefix Serial

DATE RECEIVED

FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

Name of Offering (E	I check if this is an amendment; na	me has not ch	anged)				
MEMBERSHIP II	MEMBERSHIP INTERESTS OF ROCKPORT S II, LLC						
Filing Under (Check	box(es) that apply): [] Rule 504	[] Rule 505	[] Rule 506 [] Section 4(6) [] ULOE				
Type of Filing:	[✓] New Filing	[]	Amendment				
	A. BASIC IDE	NTIFICATIO	N DATA				
1. Enter the informa	ation requested about the issuer						
	ck if this is an amendment and nam C (the "Company")	ne has changed	l, and indicate change.)				
Address of Executive 160 Federal Street	e Offices (Number and Street, C t, 18 th Floor, Boston, Massachusetts		Code) Telephone Number (Including Area Code) (617) 912-1445				

 -	A. BASIC IDENTIFICATION DATA						
Address of Principa Area Code) (if differ	l Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Incl. rent from Executive Offices)						
Brief Description of The Company is org Preferred Stock of a	ganized to acquire, hold, exercise rights in connection with, and dispose shares of Series E						
Type of Business Organization	[☑] other (please specify): Limited Liability						
[] corporation [] business trust	[] limited partnership, already formed Company [] limited partnership, to be formed						
Organization: tion: (Enter tw	Month Year d Date of Incorporation or [0][9] [0][6] [] Actual [☑] Estimated wo-letter U.S. Postal Service abbreviation for State: for other foreign jurisdiction) [D][E]						

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under <u>Regulation D</u> or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

A. BASIC IDENTIFICATION DATA	
 Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. 	of a
Check Box(es) that [] Promoter [] Beneficial [] Executive [] Director Managing Member Officer	
Full Name (Last name first, if individual) RockPort SG II, LLC	
Business or Residence Address (Number and Street, City, State, Zip Code) 160 Federal Street, 18 th Floor, Boston, Massachusetts 02110	
Check Box(es) that [] Promoter [] Beneficial [] Executive Officer [] Director	5
Full Name (Last name first, if individual) James, William E.	
Business or Residence Address (Number and Street, City, State, Zip Code) c/o RockPort SG II, LLC, 160 Federal Street, 18th Floor, Boston, Massachusetts 02110	
Check Box(es) that [] Promoter [] Beneficial [] Executive [] Director ☑ Principal of Managi Apply: Owner Officer Member	ng
Full Name (Last name first, if individual) James, Janet B.	
Business or Residence Address (Number and Street, City, State, Zip Code) c/o RockPort SG II, LLC, 160 Federal Street, 18 th Floor, Boston, Massachusetts 02110	
Check Box(es) that [] Promoter [] Beneficial [] Executive [] Director ☑ Principal of Managi Apply: Owner Officer Member	ng
Full Name (Last name first, if individual) Prend, David J.	
Business or Residence Address (Number and Street, City, State, Zip Code) c/o RockPort SG II, LLC, 160 Federal Street, 18 th Floor, Boston, Massachusetts 02110	

	A. BASIC ID	ENTIFICATION DA	ATA			
Check Box(es) that [] Promoter [Apply:] Beneficial Owner	[] Executive Officer	[] Director E	Principal of Managing Member		
Full Name (Last name first, if individu Ellis III, Alexander	al)					
Business or Residence Address						
c/o RockPort SG II, LLC, 160 Federal S	Street, 18th Floor,	Boston, Massachus	etts 02110			
Check Box(es) that [] Promoter [Apply:] Beneficial Owner	[] Executive Officer	[] Director	Principal of Managing Member		
Full Name (Last name first, if individu McDermott, Charles J.	al)					
Business or Residence Address c/o RockPort SG II, LLC, 160 Federal S		Street, City, State, Z Boston, Massachus				
Check Box(es) that [] Promoter [Apply:] Beneficial Owner	[] Executive Officer	[] Director [2 Principal of Managing Member		
Full Name (Last name first, if individu Wilson, Stoddard M.	al)					
Business or Residence Address c/o RockPort SG II, LLC, 160 Federal S	Business or Residence Address (Number and Street, City, State, Zip Code) c/o RockPort SG II, LLC, 160 Federal Street, 18th Street, Boston, Massachusetts 02110					

			· · · · · · · · · · · · · · · · · · ·]	B. INFO	RMATIO	ON ABO	UT OFF	ERING				
1.	Has offer	the issu	ier sold,	or does	the issu	er intend	l to sell,	to non-a	ccredite	d invest	ors in th	is 	Yes	No [☑]
				A	nswer a	lso in Ap	pendix,	Column	2, if filin	ng under	ULOE.			
2.	2. What is the minimum investment that will be accepted from any Member?								may be waived					
•	De the ffering consisting and analysis of a single unit?							_	<u>by managi</u> Yes	<u>ng Member)</u> No				
3.	3. Does the offering permit joint ownership of a single unit? Yes [☑]							[図]	[]					
4.	Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.													
Ful	ll Nan	ne (Las	t name i	first, if in	ndividua	nl)			. •					
Bus	siness	or Res	sidence A	Address		(Numb	er and S	Street, Ci	ty, State	, Zip Co	de)			
Na	me of	Associ	ated Br	oker or I	Dealer									
Sta (Cl	ites in neck "	Which	Person	Listed I	Has Soli lividual	cited or I States)	intends	to Solicit	Purcha	sers		[]	All States	
[AI		[AK]	[AZ]	[AR]	[CA]	[co]	[CT]	[DE]	[DC]	[FL]	[GA]	[H]	-	
[IL	-	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[M:		ļ
[M	-	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[O] [W]	_	
	[RI] [SC] [SD] [TN] [TX] [UT] [VI] [VA] [WA] [WV] [WI] [WY] [PR] Full Name (Last name first, if individual)													
Business or Residence Address (Number and Street, City, State, Zip Code)														
Na	me of	f Assoc	iated Br	oker or l	Dealer									
Sta (Cl	ites ir heck "	n Whicl 'All Sta	n Person tes" or o	Listed I	Has Soli lividual	cited or l States)	Intends		t Purcha	sers			All States	}
[A]		[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[H]		
[IL	-	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[M		
[M		[NE]	[NV]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[O] [W]		
[R	Lj	[SC]	[SD]	[TIN]	[TV]	[OI]	[* +]	[4 12]	LTTAX	[,,,,]		L''	-) [^ ^\]	

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OR PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "o" if answer is "none" or "zero." If the transaction is an exchange offering, check this box [] and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Target Commitment Amount	Amount of Capital Contribution
	Debt Equity	\$o \$	\$ <u>O</u> \$
	[] Preferred		
	Convertible Securities: Partnership Interests Other: Membership Interests in the Company and Contribution of Managing Member. Total Answer also in Appendix, Column 3, if filing under ULOE.	\$0 \$ \$3,250,000 \$3,250,000	\$0 \$0 \$3,045,000 \$3,045,000
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "o" if answer is "none" or "zero."	Number of Investors	Contribution of Capital
	Accredited Investors	25 0 N/A	\$3,045,000 \$0 \$N/A
3.	If this filing is for an offering under <u>Rule 504</u> or <u>505</u> , enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in		
	Part C-Question 1. Type of offering Rule 505	Type of Security N/AN/AN/AN/A	Dollar Amount Sold N/A N/A N/A N/A N/A

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OR PROCEEDS

4. a	and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees Printing and Engraving Costs Legal Fees Accounting Fees Engineering Fees Sales Commissions (specify finders' fees separately) Other Expenses (identify) Total]]]]] \$
b.	Enter the difference between the aggregate offering price given in response to Part C- Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer."		\$ <u>3,213,000</u>
5.	Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.	Payments to Officers, Directo & Affiliates	Payments To Others
	Salaries and fees	[]\$o	[]\$o
	Purchase of real estate	[]\$o	[]\$o
	Purchase, rental or leasing and installation of machinery and equipment	[]\$ <u> </u>	[]\$ <u> </u>
	Construction or leasing of plant buildings and facilities	[]\$o	[]\$o
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	[]\$o	[]\$ <u> </u>
	Repayment of indebtedness	[]\$ <u>o</u>	[]\$ <u> </u>
	Capital contribution amounts towards the Company's formation, organization, operation and management	[]\$	 \$3,213,000
	Other (specify):	[]\$ <u>o</u>	[]\$ <u>o</u>
	Column Totals	[]\$	团\$ <u>3,213,000</u>
	Total Payments Listed (column totals added)	☑ \$ <u>3,2</u>	13,000

D. FEDERAL SIGNATURE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under <u>Rule 505</u>, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of <u>Rule 502</u>.

Issuer (Print or Type)	Signature	Date
ROCKPORT S II, LLC	Somme	October 9, 2006
BY: RockPort SG II, LLC, its Managing Member	ZJEDUWE)	
Name of Signer (Print or Type)	Title of Signer (Print or Type)	
Janet James	Principal	

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)